FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

	For An A	uthorized Con	nmittee		Offi	ice Use Only	
NAME OF COMMITTEE (in full)	USE FEC MAILI OR TYPE OR PR		Example:If typing, ty over the lines	/pe			
MCNULTY FOR CONGRE	SS					1 1 1 1 1	
	1 1 1 1 1	<u> </u>		1 1 1 1		1 1 1 1 1	
ADDRESS (number and street)	P.O. Box 15	60					
Check if different							
than previously reported. (ACC)	Green Island	.			NY L	12183	
2. FEC IDENTIFICATION NUI	MBER ¥	CITY A	l	ST	ATE A	ZIP CODE A	-
C00230417		3. IS THIS REPORT	X NEW (N)	or [AMENDED (A)	[NY]	
4. TYPE OF REPORT (0	Choose One)	(b) 12-Day P	RE -Election Repor	t for the:			
April 15 Quarterly	Report (O1)		Primary (12P)		General (12G)) Run	off (12R)
			Convention (1	2C)	Special (12S)		
July 15 Quarterly I X October 15 Quarter		Election o	on		v v	in the State of	
January 31 Year-E	End Report (YE)	(c) 30-Day P	OST-Election Repo	ort for the:			
			General (30G		Runoff (30R)	Spec	cial (30S)
Termination Repo	rt (TER)	Election o	n			in the State of	
5. Covering Period 0.8	3 24	2006	through	09	3 0	2006	
I certify that I have examined this	-	-	dge and belief it is t	rue, correct and	d complete.		
Type or Print Name of Treasurer	John M	cNulty					
Signature of Treasurer Electron	onically Filed by	John McNulty		Date	1 0	09 2	006
NOTE : Submission of false, erro	oneous, or incomple	ete information ma	ay subject the perso	n signing this F	Report to the pena	alties of 2 U.S.C 43	37g.
Office Use Only						FEC FORM (Revised 02/2003)	

Image# 26930422570

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003) Page 2 Write or Type Committee Name MCNULTY FOR CONGRESS D D ° D 24 0 9 0 8 2006 2006 Report Covering the Period: From: To: 3 0 **COLUMN B COLUMN A This Period Election Cycle-to-Date** Net Contributions (other than loans) (a) Total Contributions 72550.00 416481.93 (other than loans) (from Line 11(e))...... (b) Total Contribution Refunds 0.00 3150.00 (from Line 20(d))..... (c) Net Contributions (other than loans) 72550.00 413331.93 (subtract Line 6(b) from Line 6(a))....... 7. Net Operating Expenditures (a) Total Operating Expenditures 65810.83 277556.76 (from Line 17)..... (b) Total Offsets to Operating 0.00 1334.57 Expenditures (from Line 14)..... (c) Net Operating Expenditures 276222.19 65810.83 (subtract Line 7(b) from Line 7(a))....... Cash on Hand at Close of 310616.36 Reporting Period (from Line 27)..... 9. Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)..... For further information contact: Federal Election Commission

999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100 FEC Form 3 (Revised 02/2003)

DETAILED SUMMARY PAGE

of Receipts

Page 3

Write or Type Committee Name MCNULTY FOR CONGRESS D D D 8 0 24 2006 09 2006 From: 3 0 Report Covering the Period: To: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 10455.00 133480.00 (i) Itemized (use Schedule A)..... 7445.00 30245.00 (ii) Unitemized..... (iii) TOTAL of contributions 17900.00 163725.00 from individuals..... 2305.00 11311.93 (b) Political Party Committees..... (c) Other Political Committees 52345.00 241445.00 (such as PACS)..... 0.00 0.00 (d) The Candidate..... (e) TOTAL CONTRIBUTIONS (other than loans) 72550.00 416481.93 (add Lines 11(a)(iii), (b), (c), and (d)) 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES..... 13. LOANS (a) Made or Guaranteed by the 0.00 0.00 Candidate..... 0.00 0.00 (b) All Other Loans..... (c) TOTAL LOANS 0.00 0.00 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 0.00 1334.57 (Refunds, Rebates, etc.).... 15. OTHER RECEIPTS 764.39 8179.84 (Dividends, Interest, etc.)..... 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...... 73314.39 425996.34

FEC Form 3 (Revised 02/2003)

DETAILED SUMMARY PAGE

of Disbursements

Page 4

II. DISBU	RSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING E	XPENDITURES	65810.83	277556.76
18. TRANSFERS T AUTHORIZED	O OTHER COMMITTEES	0.00	0.00
` '	ENTS: lade or Guaranteed	0.00	0.00
•	Loans	0.00	0.00
(c) TOTAL LO	AN REPAYMENTS 19(a) and (b))	0.00	0.00
	CONTRIBUTIONS TO:		
()	Persons Other cal Committees	0.00	0.00
	rty Committees	0.00	0.00
` '	cal Committees ACs)	0.00	3150.00
, ,	NTRIBUTION REFUNDS 20(a), (b), and (c))	0.00	3150.00
21. OTHER DISBU	RSEMENTS	55223.00	158294.95
22. TOTAL DISBUF (add Lines 17, 1	RSEMENTS 8, 19(c), 20(d), and 21)	121033.83	439001.71
	III. CASH SUMN	MARY	
23. CASH ON HAN	D AT BEGINNING OF REPORTIN	IG PERIOD	358335.80
24. TOTAL RECEIF	PTS THIS PERIOD (from Line 16, p	page3)	73314.39
25. SUBTOTAL (ad	d Line 23 and Line 24)		431650.19
26. TOTAL DISBUF	RSEMENTS THIS PERIOD (from L	.ine 22)	121033.83
27. CASH ON HAN	D AT CLOSE OF REPORTING PE	ERIOD	310616.36

	HEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 5 / 50 (check only one) X 11a
or fo	rinformation copied from such Reports and S or commercial purposes, other than using the NAME OF COMMITTEE (In Full) MCNULTY FOR CONGRESS	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
A	Full Name (Last, First, Middle Initial) Daniel C. Ashley Mailing Address 10 Ashley Way City Troy FEC ID number of contributing rederal political committee. Name of Employer Dan Ashley Auto Sales Receipt For: 2006 X Primary General Other (specify)	State NY C Occupation Owner Election C	Zip Code 12180 n Cycle-to-Date ▼ 300.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
B. :	Full Name (Last, First, Middle Initial) Sidney Cohen Mailing Address 12 Friebel Rd City Albany FEC ID number of contributing rederal political committee. Name of Employer Retired Receipt For: 2006 X Primary General Other (specify)	State NY C Occupation Retired Election C	Zip Code 12208 n Cycle-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C. 1	Full Name (Last, First, Middle Initial) Marilyn D. Fane Mailing Address 62 Leversee Rd City Troy FEC ID number of contributing rederal political committee. Name of Employer Self Receipt For: 2006 Primary X General Other (specify)		Zip Code 12182 n ng Contractor cycle-to-Date ▼ 725.00	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	BTOTAL of Receipts This Page (optional)			350.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 50 (check only one) X 11a 11b 11c 11d 11d 12 13a 13b 14 15
Any information copied from such Reports and Sta or for commercial purposes, other than using the r NAME OF COMMITTEE (In Full) MCNULTY FOR CONGRESS	atements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Kirsten E. Gillibrand Mailing Address 358 Mt. Merino Rd. City Hudson FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: 2006 X Primary General Other (specify)	State Zip Code NY 12534 C Occupation Attorney Election Cycle-to-Date ▼ 250.00	Date of Receipt M M
Full Name (Last, First, Middle Initial) Herbert F. Gretz, MD Mailing Address 1283 Hawthorn Rd. City Schenectady FEC ID number of contributing federal political committee. Name of Employer Retired Receipt For: 2006 Primary X General Other (specify)	State Zip Code NY 12309 C Occupation Doctor Election Cycle-to-Date 200.00	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Jay Halayko Mailing Address 637 3rd Ave City Watervliet FEC ID number of contributing federal political committee. Name of Employer Schuyler Bakery Inc. Receipt For: 2006 X Primary General Other (specify)	State Zip Code NY 12189 C Occupation General Manager Election Cycle-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	••••••••••••••••••••••••••••••••••••••	950.00
TOTAL This Period (last page this line number o	nly)	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 50 (check only one) X 11a 11b 11c 11d 11d 12 13a 13b 14 15
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
MCNULTY FOR CONGRESS		
Full Name (Last, First, Middle Initial) Raymond Kinley, Jr. Mailing Address III Winners Circle		Date of Receipt
P.O. Box 5269	State Zip Code	0 9 0 5 2 0 0 6 Transaction ID: AD5AAC11DE1A5471684E
Albany	NY 12205-0269	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Clough, Harbour & Associates Receipt For: 2006 X Primary General Other (specify) ▼	Occupation CEO Election Cycle-to-Date ▼ 2000.00	Check Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) Erin Lane Mailing Address 4203 32nd St		Date of Receipt
City	State Zip Code	0 9 0 8 2 0 0 6 Transaction ID: AADFE0E10422543B9902
Mt. Rainier	MD 20712	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00 Check
Name of Employer Plug Power, Inc.	Occupation Government Relations	Limit Increased Due to Opponent's
Receipt For: 2006 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) 2. Joseph Legnard		Date of Receipt
Mailing Address 34 Walden Glen		09 10 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: AC371229903864E31B36
Ballston Lake	NY 12019	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00 Check
Name of Employer Village of Green Island	Occupation Attorney	Limit Increased Due to Opponent's
Receipt For: 2006 X Primary General Other (specify)	Election Cycle-to-Date ▼ 775.00	Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)	1025.00
TOTAL This Period (last page this line numb	<u> </u>	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedul or each category of th Detailed Summary Pa	e (crieck only one)	
Any information copied from such Reports and or for commercial purposes, other than using t	Statements may not be sold or used by a he name and address of any political com	ny person for the purpose of soliciting contributions mittee to solicit contributions from such committee.	
NAME OF COMMITTEE (In Full) MCNULTY FOR CONGRESS			
Full Name (Last, First, Middle Initial) John Lenney Mailing Address 42 Malibu Hill		Date of Receipt	
Mailing Address 42 Malibu Hill		08 / 24 / 2006	
City	State Zip Code	Transaction ID: A5C2A32363AA143A4A5C	
Rensselaer	NY 12144	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	90.00	
Name of Employer	Occupation	Check	
Receipt For: 2006	Retired Election Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
X Primary General			
Other (specify) ▼	215	5.00	
Full Name (Last, First, Middle Initial)	•	Date of Receipt	
Mailing Address 719 Bobby Ct	Ellen Malkis Mailing Address 710 Pohby Ct		
	09 10 2006		
City	State Zip Code	Transaction ID: ACADD9A104C4440C188B	
<u>Niskayuna</u>	NY 12309	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	100.00	
Name of Employer Schenectady County	Occupation	Check	
	Personnel	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2006 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 225	5.00	
Full Name (Last, First, Middle Initial) C. Morris Massry		Date of Receipt	
	•		
City	State Zip Code	Transaction ID: A28BF82033DD841409F2	
Albany	NY 12205-5533	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	2100.00	
Name of Employer Tri City Rentals	Occupation	Check	
	Owner	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2006 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 4200	0.00	
SUBTOTAL of Receipts This Page (optional)		2290.00	
TOTAL This Period (last page this line numb			

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 50 (check only one) X 11a			
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may not be sold or used by any person the name and address of any political committee to	on for the purpose of soliciting contributions			
NAME OF COMMITTEE (In Full) MCNULTY FOR CONGRESS					
Full Name (Last, First, Middle Initial) A. Morris Massry Million Address AM P. D. H. D.	Morris Massry				
Mailing Address Massry Realty Part 255 Washington A	08 26 2006				
City	State Zip Code	Transaction ID: A07543935E0424A24AFD			
Albany	NY 12205-5533	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	1100.00			
Name of Employer Tri City Rentals	Occupation	Check			
	Owner	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)			
Receipt For: 2006 X Primary General	Election Cycle-to-Date ▼	1			
Other (specify) ▼	4200.00				
Full Name (Last, First, Middle Initial) 3. Norman Massry					
Mailing Address 255 Washington A	Date of Receipt M M D D Y Y Y Y Y Y Y Y				
City	State Zip Code	Transaction ID: AD6991C047F7B42D2ACI			
Albany	NY 12205-5533	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	2100.00			
Name of Employer	Occupation	Check			
Tri City Renfals	Executive	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)			
Receipt For: 2006 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 4200.00				
Full Name (Last, First, Middle Initial) Norman Massry		Date of Receipt			
Mailing Address 255 Washington A	ve Ext	08 26 2006			
City	State Zip Code	Transaction ID: A0203ECC50ADF461C852			
Albany	NY 12205-5533	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	975.00			
Name of Employer	Occupation	Check			
Tri City Renfals	Executive	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)			
Receipt For: 2006 X Primary General	Election Cycle-to-Date ▼	Spending (2 s.s.s. Tria(i) Tria i)			
Other (specify)	4200.00				
SUBTOTAL of Receipts This Page (optional	, lie	4175.00			
TOTAL This Period (last nage this line num	nher only)				

SCHEDULE A (FEC Form	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 50 (check only one) X 11a 11b 11c 11d 11d 12 13a 13b 14 15
Any information copied from such Report or for commercial purposes, other than to NAME OF COMMITTEE (In Full) MCNULTY FOR CONGRESS	rts and Statements may not be sold or used by any per using the name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Tom Nardacci Mailing Address 119 Winthrop A City Albany FEC ID number of contributing federal political committee. Name of Employer Grammercy Receipt For: 2006 X Primary General Other (specify)	State Zip Code NY 12203 C Occupation Owner/Public Relations Election Cycle-to-Date 295.00	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Gino Pazzaglini Mailing Address 6 Rose Ridge C City Saratoga Springs FEC ID number of contributing federal political committee. Name of Employer Seton Health Receipt For: 2006 X Primary General Other (specify)	State Zip Code NY 12866 C Occupation Pres./ceo Election Cycle-to-Date ▼	Date of Receipt M M
Full Name (Last, First, Middle Initial) Martin Scher Mailing Address 136 No Lake Av City Albany FEC ID number of contributing federal political committee. Name of Employer M. Scher & Son, Inc. Receipt For: 2006 Primary X General Other (specify)	State Zip Code NY 12206 C Occupation Electrical Contractor Election Cycle-to-Date 375.00	Date of Receipt M M
	tional)	420.00
TOTAL This Period (last page this line	number only)	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11/50 (check only one) X
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) MCNULTY FOR CONGRESS	and Statements may not be sold or used by any persong the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Howard W. Shawn Mailing Address 301 Glendale Roa	d	Date of Receipt
City Scarsdale FEC ID number of contributing federal political committee.	State Zip Code NY 10583-1509	Transaction ID: A55CB475D9C264D36A8 Amount of Each Receipt this Period 500.00
Name of Employer Retired Receipt For: 2006 Primary X General Other (specify) ▼	Occupation Retired Election Cycle-to-Date 500.00	Check Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) Dr. James Slavin Mailing Address 26 Park Dr	Date of Receipt 0 9 2 6 2 0 0 6	
City	State Zip Code	Transaction ID: A624EC50F21E14717A4
Menands	NY 12204-2242	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Self	Occupation Physcian	Check Limit Increased Due to Opponent's
Receipt For: 2006 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) C. Beno Sternlicht		Date of Receipt
Mailing Address 123 Partridge Run		09 29 2006
City Schenectady	State Zip Code NY 12309	Transaction ID: AC58551F0138640099A8 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	200.00
Name of Employer Retired	Occupation Retired	Check Limit Increased Due to Opponent's
Receipt For: 2006 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 700.00	Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (option	•	1200.00

FOR LINE NUMBER: PAGE 12/50 SCHEDULE A (FEC Form 3) Use separate schedule(s) (check only one) or each category of the **ITEMIZED RECEIPTS** 11a 11b 11c 11d Detailed Summary Page 12 13a 13b 14 15 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MCNULTY FOR CONGRESS Full Name (Last, First, Middle Initial) Walter Wheeler Date of Receipt Mailing Address 11 California Ave 09 10 2006 City Transaction ID: A1963000AFF4A49B89AF State Zip Code Rensselaer NY 12144 Amount of Each Receipt this Period FEC ID number of contributing C 45.00 federal political committee. Check Name of Employer Playtex Products Occupation Machine Shop Adjustor Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) Receipt For: Election Cycle-to-Date 2006 X Primary General 295.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	45.00
TOTAL This Period (last page this line number only)	•	10455.00

	CHEDULE A (FEC Form 3 EMIZED RECEIPTS)	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 50 (check only one) 11a X 11b 11c 11d 12 13a 13b 14 15
Ar or	ny information copied from such Reports ar for commercial purposes, other than using	nd Statements ma the name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) MCNULTY FOR CONGRESS			
Α.	Full Name (Last, First, Middle Initial) Canestrari for Assembly Committee	Date of Receipt		
	Mailing Address 16 Roosevelt Blvd.	09 10 2006		
	City	State	Zip Code	Transaction ID: AB8ABB6AFA6944753BCI
	Cohoes	NY	12047	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer	Occupatio	n	Check Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	0 0	550.00	
В.	Full Name (Last, First, Middle Initial) Colonie Democratic Committee			Date of Receipt
	Mailing Address 19 Louise Drive	09 10 2006		
	City	State	Zip Code	Transaction ID: AD66D3E36F88D4465B85
	Latham	NY	12110	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		410.00
	Name of Employer	Occupatio	n	Check Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	0 0	535.00	
c.	Full Name (Last, First, Middle Initial) Devine For Justice			Date of Receipt
	Mailing Address c/o John Chiaramo 8 Vatrano Lane	nte		0 9 1 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State NY	Zip Code	Transaction ID: A65102C76ED094154939
	Loudonville FEC ID number of contributing		12211	Amount of Each Receipt this Period
	federal political committee.	C		25.00
	Name of Employer	Occupatio	n	Check Limit Increased Due to Opponent's
	Receipt For: 2006 X Primary General Other (specify) ▼	Election (Cycle-to-Date ▼ 25.00	Spending (2 U.S.C. 441a(i)/441a-1)
s	UBTOTAL of Receipts This Page (optional	l)		485.00
Т	OTAL This Period (last page this line num	ber only)		

	CHEDULE A (FEC Form 3 EMIZED RECEIPTS)	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 50 (check only one) 11a
An or	y information copied from such Reports an for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) MCNULTY FOR CONGRESS			
۹.	Full Name (Last, First, Middle Initial) Friends of Bob Godlewski			Date of Receipt
	Mailing Address 1046 Manas Dr.			0 9 1 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: A9A9E2DD69A664715A43
	Schenectady	NY	12303	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		45.00
	Name of Employer	Occupatio	n	Check Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	0 0	45.00	
3.	Full Name (Last, First, Middle Initial) Friends of Brian Stratton			Date of Receipt
	Mailing Address 729 DeCamp Ave.	09 10 2006		
	City	State	Zip Code	Transaction ID: A5A36A06236FA4E7D85A
	Schenectady	NY	12309	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		275.00
	Name of Employer	Occupatio	n	Check Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	0 0	400.00	
) .	Full Name (Last, First, Middle Initial) Friends of Harry Buffardi	-		Date of Receipt
	Mailing Address 1436 Altamont Aver Box 179	nue		09 10 / Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: A8C860C98C13A41AF916
	Schenectady	NY	12303	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer	Occupatio	n	Check Limit Increased Due to Opponent's
	Receipt For: 2006 X Primary General Other (specify) ▼	Election C	Cycle-to-Date ▼ 100.00	Spending (2 U.S.C. 441a(i)/441a-1)
s	UBTOTAL of Receipts This Page (optiona	l)		420.00
т.	OTAL This Period (last page this line num	per only)		

SCHEDULE A (FEC Form	3)	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 50 (check only one) 11a
Any information copied from such Reports or for commercial purposes, other than us	and Statements may ing the name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MCNULTY FOR CONGRESS			
Full Name (Last, First, Middle Initial) Friends of Mayor Jennings			Date of Receipt
Mailing Address P.O. Box 7103			09 10 2006
City	State	Zip Code	Transaction ID: A7AC916A4B5B44A67BE
Albany	NY	12224	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer	Check Limit Increased Due to Opponent's		
Receipt For: 2006	Election C	Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
X Primary General Other (specify) ▼	0 0	250.00	
Full Name (Last, First, Middle Initial) Friends of Tom Nitido			Date of Receipt
Mailing Address 27 Forest Avenu	09 10 2006		
City	State	Zip Code	Transaction ID: ABF63041C48144C50B39
<u>Albany</u>	NY	12208	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer	Occupation	n	Check Limit Increased Due to Opponent's
Receipt For: 2006	Election C	Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
X Primary General Other (specify) ▼		100.00	
Full Name (Last, First, Middle Initial) Green Island Democratic Association			Date of Receipt
Mailing Address P O Box 1611			09 08 2006
City	State	Zip Code	Transaction ID: A2541AA06177942E9AC5
Green Island	NY	12183	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer	Occupation	n	Check Limit Increased Due to Opponent's
Receipt For: 2006 X Primary General Other (specify) ▼	Election C	Cycle-to-Date ▼ 1000.00	Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (option	onal)		1350.00
TOTAL This Period (last page this line n	umber only)		

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

PAGE 16/50 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the 11a Х 11b 11c **Detailed Summary Page** 12 13a 13b 14 15 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MCNULTY FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Receipt McLaughlin Campaign Mailing Address 1910 Cambridge Manor Drive 09 10 2006 City State Zip Code Transaction ID: AEC1A5C6FBF8D465E969 Scotia NY 12302-2443 Amount of Each Receipt this Period FEC ID number of contributing 25.00 C federal political committee. Check Name of Employer Occupation Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) Receipt For: 2006 Election Cycle-to-Date X Primary General 25.00 Other (specify) Full Name (Last, First, Middle Initial) B. Trees 4 Assembly Date of Receipt Mailing Address P.O. Box 485 0 9 10 2006 City Transaction ID: A5585E7120193473FABA State Zip Code Richmondville NY 12149 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Check Name of Employer Occupation Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) Receipt For: 2006 Election Cycle-to-Date X Primary General 25.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	50.00
TOTAL This Period (last page this line number only)	<u> </u>	2305.00

	CHEDULE A (FEC Form 3 EMIZED RECEIPTS)	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 50 (check only one) 11a
An or	y information copied from such Reports and for commercial purposes, other than using	d Statements ma the name and ad	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) MCNULTY FOR CONGRESS			
۹.	Full Name (Last, First, Middle Initial) Amalgamated Transit Union-Local 1321 Mailing Address 1044 Broadway			Date of Receipt
				09 10 2006
	City Albany	State NY	Zip Code 12204	Transaction ID: A506EAA9DCAC747B69B Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer	Occupatio	n	Check Limit Increased Due to Opponent's
	Receipt For: 2006 X Primary General Other (specify) ▼	Election C	Cycle-to-Date ▼ 175.00	Spending (2 U.S.C. 441a(i)/441a-1)
3.	Full Name (Last, First, Middle Initial) American Council Of Life Insurers, PAC	Date of Receipt		
	Mailing Address 101 Constitution Av Suite 700	08 31 2006		
	City	State	Zip Code	Transaction ID: ABE9E8E9F79A7405AA68
	Washington	DC	20001	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupatio	n	Check Limit Increased Due to Opponent's
	Receipt For: 2006	Election (Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼		2000.00	
).	Full Name (Last, First, Middle Initial) American Hospital Association PAC	'		Date of Receipt
	Mailing Address 325 Seventh Street, #6-F	N.W.		09 07 2006
	City Washington	State DC	Zip Code 20004-2802	Transaction ID: A92BBF2AFD2554FA7868
	FEC ID number of contributing		20004-2802	Amount of Each Receipt this Period
	federal political committee.	C		1000.00 Check
	Name of Employer	ame of Employer Occupation		Limit Increased Due to Opponent's
	Receipt For: 2006 X Primary General Other (specify) ▼	Election (Cycle-to-Date ▼ 2000.00	Spending (2 U.S.C. 441a(i)/441a-1)
SI	JBTOTAL of Receipts This Page (optional)		2050.00
т	OTAL This Period (last page this line numb	per only)		

	HEDULE A (FEC Form 3 EMIZED RECEIPTS)	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 50 (check only one) 11a	
Any or fo	r information copied from such Reports an or commercial purposes, other than using	d Statements ma the name and ad	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.	
`	NAME OF COMMITTEE (In Full) MCNULTY FOR CONGRESS				
۸. ہ	Full Name (Last, First, Middle Initial) American Medical Association PAC			Date of Receipt	
ľ	Mailing Address 1101 Vermont Aver	iue, NW		09 11 2006	
	City	State	Zip Code	Transaction ID: A7E6064AEFDD14896ADI	
	Washington	DC	20005	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		2000.00 Check	
1	Name of Employer	ame of Employer Occupation			
F	Receipt For: 2006	Election (Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)	
	X Primary General Other (specify) ▼		2000.00		
	Full Name (Last, First, Middle Initial) American Nurses Association- PAC			Date of Receipt	
_	Mailing Address 600 Maryland Aven Suite 100 West	08 26 2006			
	City	State	Zip Code	Transaction ID: A43A8375641D3413AA8C	
	Washington	DC	20024-2571	Amount of Each Receipt this Period	
	FEC ID number of contributing rederal political committee.	C		1000.00	
1	Name of Employer	Occupation	on	Check	
-				Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
ŀ	Receipt For: 2006 X Primary General Other (specify) ▼	Election	Cycle-to-Date ▼ 1000.00		
_	Full Name (Last, First, Middle Initial) Association of Trial Lawyers of America			Date of Receipt	
ľ	Mailing Address 1050 31st Street, N	W		09 08 YYYY 2006	
	City	State	Zip Code	Transaction ID: A14667EE0A51840E2B32	
_	Washington	DC	20007	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		4000.00	
1	Name of Employer	Occupation		Check Limit Increased Due to Opponent's	
F	Receipt For: 2006	Election (Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)	
	Primary X General Other (specify) ▼		10000.00		
SU	IBTOTAL of Receipts This Page (optiona	l)		7000.00	
τo	TAL This Period (last page this line num)	her only)			

	CHEDULE A (FEC Form 3 EMIZED RECEIPTS)	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 50 (check only one) 11a
Ar or	ny information copied from such Reports an for commercial purposes, other than using	d Statements ma the name and ad	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions
\setminus	NAME OF COMMITTEE (In Full) MCNULTY FOR CONGRESS			
Δ.	Full Name (Last, First, Middle Initial) Carpenters Legislative Improvement			Date of Receipt
	Mailing Address Committee PAC 101 Constitution Av	09 11 2006		
	City Washington	State DC	Zip Code 20001	Transaction ID: A99708480FA2843A0A6A
	FEC ID number of contributing federal political committee.	C	20001	Amount of Each Receipt this Period 5000.00
	Name of Employer	Occupatio	n	Check Limit Increased Due to Opponent's
	Receipt For: 2006 Primary X General Other (specify) ▼	Election C	Cycle-to-Date ▼ 6500.00	Spending (2 U.S.C. 441a(i)/441a-1)
В.	Full Name (Last, First, Middle Initial) CWA-COPE PCC			Date of Receipt
	Mailing Address 501 3rd Street	09 11 2006		
	City	State DC	Zip Code	Transaction ID: ADCAF702693CD47CC90
	Washington FEC ID number of contributing		20001	Amount of Each Receipt this Period
	federal political committee.	C		1000.00
	Name of Employer	Occupatio	n	Check Limit Increased Due to Opponent's
	Receipt For: 2006	Election (Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	0 0	1000.00	
С.	Full Name (Last, First, Middle Initial) DRIVE Political Fund			Date of Receipt
	Mailing Address 25 Louisiana Ave., I	N.W.		09 26 2006
	City Washington	State DC	Zip Code 20001-2198	Transaction ID: A555740ED33F5471FA38 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2000.00
	Name of Employer	Occupatio	n	Check Limit Increased Due to Opponent's
	Receipt For: 2006 Primary X General Other (specify) ▼	Election C	Cycle-to-Date ▼ 6125.00	Spending (2 U.S.C. 441a(i)/441a-1)
s	UBTOTAL of Receipts This Page (optional)		8000.00
т	OTAL This Period (last page this line numb	per only)		

	IEDULE A (FEC Form 3))	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 50 (check only one) 11a
Any in	formation copied from such Reports and commercial purposes, other than using the	Statements ma	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\ NA	ME OF COMMITTEE (In Full) CNULTY FOR CONGRESS		,,	
4. <u>Ge</u>	I Name (Last, First, Middle Initial) neral Electric Company PAC			Date of Receipt
IVIA	iling Address 1299 Pensylvania Av 1100 West	e., N.W.		09 11 2006
Cit		State DC	Zip Code	Transaction ID: A3901F4BBE0804A2BB10
FE	ashington C ID number of contributing eral political committee.	C	20004-2407	Amount of Each Receipt this Period 1000.00
Na	me of Employer	Occupatio	n	Check Limit Increased Due to Opponent's
	ceipt For: 2006 Primary General Other (specify)	Election (Cycle-to-Date ▼ 1000.00	Spending (2 U.S.C. 441a(i)/441a-1)
3. <u>Hu</u>	Full Name (Last, First, Middle Initial) Human Rights Campaign PAC			Date of Receipt
Ma	iling Address 1640 Rhode Island A	09 25 2006		
Cit		State	Zip Code	Transaction ID: A2E668612106D4E21ADF
_	ashington	DC	20036	Amount of Each Receipt this Period
fed	C ID number of contributing leral political committee.	C		25.00 In-kind:in-kind website
	me of Employer	Occupatio		endorsement li Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Re	ceipt For: 2006 Primary X General Other (specify) ▼	Election C	Cycle-to-Date ▼ 1025.00	
_	l Name (Last, First, Middle Initial) tional Association of Home Builders			Date of Receipt
	iling Address Build Political Action 1201 15th Street, NV	<i>l</i>	7:01	09 / 08 / 2006
Cit;	y ashington	State DC	Zip Code 20005	Transaction ID: A0491CCF5782A4D2C9Ef Amount of Each Receipt this Period
FE	C ID number of contributing leral political committee.	C		2500.00
Na	me of Employer	Occupatio	n	Check Limit Increased Due to Opponent's
	ceipt For: 2006 ⟨ Primary General Other (specify) ▼	Election (Cycle-to-Date ▼ 2500.00	Spending (2 U.S.C. 441a(i)/441a-1)
SUBT	FOTAL of Receipts This Page (optional)			3525.00
тоти	AL This Period (last page this line number	er only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 50 (check only one) 11a
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MCNULTY FOR CONGRESS	atements may not be sold or used by any persor name and address of any political committee to s	for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) A. National Emergency Medicine PAC Mailing Address of the American College Emergency Physycians City Irving FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2006 Primary X General Other (specify)		Date of Receipt M M
Full Name (Last, First, Middle Initial) National Rural Letter Carriers Mailing Address Association PAC 1630 Duke St., 4th Floo City Alexandria FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2006 Primary X General Other (specify)	Or State Zip Code VA 22314-3465 C Occupation Election Cycle-to-Date ▼ 2000.00	Date of Receipt M M
Full Name (Last, First, Middle Initial) Owens Corning BETTER GOVERNMENT FUND Mailing Address One Owens Corning Pa City Toledo FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2006 X Primary General Other (specify)	State Zip Code OH 43659 C Occupation Election Cycle-to-Date 5000.00	Date of Receipt M M O O B 2 0 0 6
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number of	<u> </u>	7000.00

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 50 (check only one) 11a 11b
An or	y information copied from such Reports and Str for commercial purposes, other than using the r	atements ma name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) MCNULTY FOR CONGRESS			
۹.	Full Name (Last, First, Middle Initial) Real Estate Investment Trusts PAC Mailing Address 1875 Street, N.W. Suite 600			Date of Receipt 0 9 0 8 2 0 0 6
	City	State	Zip Code	Transaction ID: A6BCC3B902389486EB0C
	Washington	DC	20006	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Check Limit Increased Due to Opponent's		
	Receipt For: 2006 X Primary General Other (specify)	Election (Cycle-to-Date ▼ 1000.00	Spending (2 U.S.C. 441a(i)/441a-1)
3.	Full Name (Last, First, Middle Initial) Real Estate Investment Trusts PAC			Date of Receipt
	Mailing Address 1875 I Street, N.W. Suite 600			09 / 30 / Y Y Y Y Y
	City	State DC	Zip Code	Transaction ID: A0A6AADE680D5415CB53
	Washington FEC ID number of contributing federal political committee.	C	20006	Amount of Each Receipt this Period 2000.00
	Name of Employer	Occupation	n	Check Limit Increased Due to Opponent's
	Receipt For: 2006 Primary X General Other (specify)	Election (Cycle-to-Date ▼ 3000.00	Spending (2 U.S.C. 441a(i)/441a-1)
).	Full Name (Last, First, Middle Initial) Realtors Political Action Committee			Date of Receipt
	Mailing Address 430 N. Michigan Ave.			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Chicago	State II	Zip Code	Transaction ID: AA832F6CD29744D9F931
	FEC ID number of contributing federal political committee.	C	60611	Amount of Each Receipt this Period 5000.00
	Name of Employer	Occupation	n	Check Limit Increased Due to Opponent's
	Receipt For: 2006 Primary X General Other (specify) ▼	Election (Cycle-to-Date ▼ 10000.00	Spending (2 U.S.C. 441a(i)/441a-1)
SI	UBTOTAL of Receipts This Page (optional)			8000.00
т	OTAL This Period (last page this line number o	only)	>	

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 50 (check only one) 11a 11b X 11c 11d 11d 12 13a 13b 14 15
Ar or	ny information copied from such Reports and S for commercial purposes, other than using the	statements may name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full) MCNULTY FOR CONGRESS			
Α.	Full Name (Last, First, Middle Initial) Service Employees Int'l Union Mailing Address C. O. D. F. (OFUI)			Date of Receipt
	Mailing Address C.O.P.E. (SEIU) 1313 L Street NW			09 05 2006
	City Washington	State DC	Zip Code 20005	Transaction ID: ACBC3D20AB122460D98E Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20000	5000.00
	Name of Employer	Occupatio	n	Check Limit Increased Due to Opponent's
	Receipt For: 2006 Primary X General Other (specify) ▼	Election C	Cycle-to-Date ▼ 8500.00	Spending (2 U.S.C. 441a(i)/441a-1)
В.				Date of Receipt
	Mailing Address International Association PAL 1750 New York Ave., N.W.			09 / 08 / 2006
	City	State	Zip Code	Transaction ID: A6A6BD7FB00A945CBAE7
	Washington FEC ID number of contributing	DC	20006	Amount of Each Receipt this Period 2500.00
	federal political committee.	C		
	Name of Employer	Occupatio	n	Check Limit Increased Due to Opponent's
	Receipt For: 2006	Election C	Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	0 0	2500.00	
<u> </u>	Full Name (Last, First, Middle Initial) Sierra Club Political Committee			Date of Receipt
	Mailing Address 408 C Street, NE			0 9
	City Washington	State DC	Zip Code 20002	Transaction ID: A07AFF7AFC4C54C5299C
	FEC ID number of contributing		20002	Amount of Each Receipt this Period
	federal political committee.	C		20.00
	Name of Employer	Occupatio		In-kind:in-kind website endorsements Limit Increased Due to Opponent's
	Receipt For: 2006 Primary X General Other (specify) ▼	Election C	Cycle-to-Date ▼ 20.00	Spending (2 U.S.C. 441a(i)/441a-1)
s	UBTOTAL of Receipts This Page (optional)	•		7520.00
 T	OTAL This Period (last page this line number	only)	<u> </u>	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schoor each category of Detailed Summary	of the			
Any information copied from such Reports a or for commercial purposes, other than usin	nd Statements may not be sold or used by the name and address of any political of	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) MCNULTY FOR CONGRESS					
Full Name (Last, First, Middle Initial) A. Society of Interventional Radiology (SIRPA) Mailing Address 3975 Fair Ridge D	,	Date of Receipt			
Mailing Address 3975 Fair Ridge D Ste 400		09 / 08 / 2006			
City Fairfax	State Zip Code VA 22033	Transaction ID: AB2637A8D4E2E4492A13 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C 22000	1000.00			
Name of Employer					
Receipt For: 2006 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)			
Full Name (Last, First, Middle Initial) 3. U.A. Plumbers & Pipefitters L.U. #773	U.A. Plumbers & Pipefitters L.U. #773				
Mailing Address Voluntary P.A.C. F P.O. Box 1396	09 / 11 / 2006				
City	State Zip Code	Transaction ID: AB62974E75B55435B9B4			
South Glens Falls FEC ID number of contributing	NY 12803-1396	Amount of Each Receipt this Period			
federal political committee.	C	250.00			
Name of Employer	Occupation	Check Limit Increased Due to Opponent's			
Receipt For: 2006	Election Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)			
X Primary General Other (specify) ▼		500.00			
Full Name (Last, First, Middle Initial) U.A. Political Education Committee		Date of Receipt			
Mailing Address 901 Massachusett	s Ave., N.W.	09 05 2006			
City	State Zip Code	Transaction ID: A04690DBA386343AC8D9			
Washington	DC 20001	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	5000.00 Check			
Name of Employer	Occupation	Limit Increased Due to Opponent's			
Receipt For: 2006 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)			
SUBTOTAL of Receipts This Page (option	al)	6250.00			
TOTAL This Period (last page this line nur	nber only)				

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 50 (check only one) 11a 11b X 11c 11d 12 13a 13b 14 15
Ar or	ny information copied from such Reports and for commercial purposes, other than using th	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
$\left. \right\rangle$	NAME OF COMMITTEE (In Full) MCNULTY FOR CONGRESS			
Α.	Full Name (Last, First, Middle Initial) UAW V CAP			Date of Receipt
	Mailing Address 8000 East Jefferson A	Ave.		09 11 2006
	City Detroit	State MI	Zip Code 48214-3963	Transaction ID: A09BE3443901B4F199FC Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1000.00
	Name of Employer	Occupation	n	Check Limit Increased Due to Opponent's
	Receipt For: 2006 X Primary General Other (specify) ▼	Election C	Cycle-to-Date ▼ 4000.00	Spending (2 U.S.C. 441a(i)/441a-1)
В.	Full Name (Last, First, Middle Initial) United Food and Commercial Workers			Date of Receipt
	Mailing Address International Union, A 1775 K Street, N.W.	AFL-CIO/CLC		08 26 2006
	City	State	Zip Code	Transaction ID: A25BA0AFB1D78487FA6D
	Washington	DC	20006-1598	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00 Check
	Name of Employer	Occupation	n	Limit Increased Due to Opponent's
	Receipt For: 2006 X Primary General Other (specify)	Election C	Cycle-to-Date ▼ 1000.00	Spending (2 U.S.C. 441a(i)/441a-1)
<u> </u>	Full Name (Last, First, Middle Initial) United Technologies Corporation PAC			Date of Receipt
	Mailing Address Suite 600 1401 Eye Street, NW			09 / 11 / 2006
	City Washington	State DC	Zip Code 20005-6523	Transaction ID: AD03C0CE4F6AD4A94BFI Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupation	n	Check Limit Increased Due to Opponent's
	Receipt For: 2006 X Primary General Other (specify) ▼	Election C	Cycle-to-Date ▼ 4000.00	Spending (2 U.S.C. 441a(i)/441a-1)
s	UBTOTAL of Receipts This Page (optional)			3000.00
T _T	OTAL This Period (last page this line numbe	r only)		52345.00

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 50 (check only one) 11a 11b 11c 11d 11d 12 13a 13b 14 X 15
Ar or	ny information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	not be sold or used by any perso lress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full) MCNULTY FOR CONGRESS			
Α.	Full Name (Last, First, Middle Initial) HSBC			Date of Receipt
	Mailing Address 100 Mohawk Street			08 31 2006
	City	State	Zip Code	Transaction ID: A5548AC8597824B64A5
	Cohoes	NY	12047	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2.45
	Name of Employer	Occupation	1	Limit Increased Due to Opponent's
	Receipt For: 2006 Primary X General Other (specify) ▼	Election C	ycle-to-Date ▼ 1002.57	Spending (2 U.S.C. 441a(i)/441a-1)
— В.	Full Name (Last, First, Middle Initial) Pioneer Savings Bank			Date of Receipt
	Mailing Address 148 George Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: AD98B62B53579462E93
	Green Island	NY	12183	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		761.94
	Name of Employer	Occupation		Limit Increased Due to Opponent's
	Receipt For: 2006 Primary X General Other (specify) ▼	-	ycle-to-Date ▼ 7567.57	Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	•	764.39
TOTAL This Period (last page this line number only)	•	764.39

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	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	for each	erate schedule(s) category of the Summary Page	FOR LINI (check on	E NUMBER: PAGE 27 / 50 PAGE 27 / 50 PAGE 27 /
	y Information copied from such Reports and State	ments may n	ot be sold or used		
or	for commercial purposes, other than using the nan	ne and addre	ss of any political	committee to s	olicit contributions from such committee
$ \rangle$	NAME OF COMMITTEE (In Full) MCNULTY FOR CONGRESS				
	Full Name (Last, First, Middle Initial)				Transaction ID: BD1494B70CD2646809E0
A.	Albany County Young Democrats				Date of Disbursement
	Mailing Address P.O. Box 1382				$\begin{bmatrix} 0 & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 0 $
	City Albany	State NY	Zip Code 12201		Amount of Each Disbursement this Period
	Purpose of Disbursement				100.00
	sponsor 9/20/06 event				Refund or Disposal of Excess Contributions Required Under
	Candidate Name			Category/ Type	11 C.F.R. 400.53
	· -	ement For: Other (spe	2006 General	.,,,,,	-
	State: District:				
В.	Full Name (Last, First, Middle Initial) Alchar Printing				Transaction ID: BC15FFE0934AE42CD9C
	Mailing Address 602 Pawling Ave.				099 / 06 / 2006
	City Troy	State NY	Zip Code 12180		Amount of Each Disbursement this Period
	Purpose of Disbursement				862.92
	printing/picnic invites Candidate Name			Oalaman /	Refund or Disposal of Excess Contributions Required Under
	Candidate Name			Category/ Type	11 C.F.R. 400.53
	9 🗎	ement For: C Primary Other (spe	2006 General		
	State: District:				
C.	Full Name (Last, First, Middle Initial) Alchar Printing				Transaction ID: B4FD4A10EF1C34109AA5 Date of Disbursement
	Mailing Address 602 Pawling Ave.				099 / 13 / 2006
	City Troy	State NY	Zip Code 12180		Amount of Each Disbursement this Period
	Purpose of Disbursement	111	12100		347.76
	campaign/printing				Refund or Disposal of Excess
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburs Senate President	ement For: Primary Other (spe	2006 X General ecify) ▼		
	State: District:		<i>,,</i> ★		
s	UBTOTAL of Disbursements This Page (optional)			>	1310.68

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	for each	erate schedule(s) category of the Summary Page	FOR LIN (check or	E NUMBER: hly one) X 17 18 20a 20b	PAGE 28 / 50 19a
	Information copied from such Reports and Staten or commercial purposes, other than using the nam					
Ori	NAME OF COMMITTEE (In Full)	e and addre	ss or any political o	committee to s	SOIICIL CONTRIBUTIONS FROM	such committee
\rangle	MCNULTY FOR CONGRESS					
Α.	Full Name (Last, First, Middle Initial) American Express				Transaction ID: B2 Date of Disburseme	2A6C6E91F66446BB9E7 ent
	Mailing Address P.O. Box 360001				08 / 031	Y 2006
	City Fort Lauderdale	State FL	Zip Code 33336-0001		Amount of Each Di	sbursement this Period
	Purpose of Disbursement credit card: see below			· · ·	Refund or Dispo	149.94
	Candidate Name			Category/ Type	Contributions R 11 C.F.R. 400.5	equired Under
	· → I -	ement For: Primary Other (spe	2006 General			
В.	Full Name (Last, First, Middle Initial) Capital District Union Label &				Transaction ID: Bl	 DBFDB2CB12A24E8385 ent
	Mailing Address Service Trades Council, 11 California Ave.	AFL-CIO			09 / 06	2006
	City Rensselaer	State NY	Zip Code 12144		Amount of Each Di	sbursement this Period
	Purpose of Disbursement AD-10/19/06 awards dinner				Defend as Disc	250.00
	Candidate Name			Category/ Type	Refund or Disportant Contributions R	equired Under
	Senate X President	ement For: Primary Other (spe	2006 General			
	State: District: Full Name (Last, First, Middle Initial)				Transaction ID: D	 33CF116A0EBB4BBDA6
C.	CDGLCC, Inc				Date of Disburseme	ent
	Mailing Address P.O. Box 131				09 / 21	⁷ 2006
	City Albany	State NY	Zip Code 12201		Amount of Each Di	sbursement this Period
	Purpose of Disbursement			•	L	125.00
	Hon.Com. 10/18/06 event Candidate Name			Category/ Type	Refund or Dispo Contributions R 11 C.F.R. 400.5	equired Under
	Office Sought: House Disburse Senate President	ement For: Primary Other (spe	2006 X General	Yive		
	State: District:		··· •			
SI	JBTOTAL of Disbursements This Page (optional)			>		524.94

S	CHEDULE B (FEC Form 3)			FOR LINE	NUMBER: PAGE 29/50
	EMIZED DISBURSEMENTS	for each ca	ate schedule(s) ategory of the ummary Page	(check only	
	y Information copied from such Reports and S for commercial purposes, other than using the				for the purpose of solicating contributions
\rangle	NAME OF COMMITTEE (In Full) MCNULTY FOR CONGRESS				
Α.	Full Name (Last, First, Middle Initial) College of Saint Rose				Transaction ID: B8C02D651E7364F979BF Date of Disbursement M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 432 Western Ave				03 00 2000
	City Albany	State NY	Zip Code 12203		Amount of Each Disbursement this Period
	Purpose of Disbursement Sponsorship-Whalen Golf Classic Candidate Name			Category/	250.00 Refund or Disposal of Excess Contributions Required Under
		sbursement For:	2006 General	Type	11 C.F.R. 400.53
	President State: District:	Other (spec			
В.	Full Name (Last, First, Middle Initial) Colonie Elks Lodge #2192				Transaction ID: BB17FBA635F754E07B99 Date of Disbursement
	Mailing Address P.O. Box 756				09 / 11 / 2006
	City Latham	State NY	Zip Code 12110		Amount of Each Disbursement this Period
	Purpose of Disbursement facility 9/10/06 summer picnic Candidate Name			Category/	1561.50 Refund or Disposal of Excess Contributions Required Under
		sbursement For:	2006	Type	11 C.F.R. 400.53
	Senate President State: District:	X Primary Other (spec	General ify) ▼		
С.	Full Name (Last, First, Middle Initial) Felthousen's Florist & Greenhouse				Transaction ID: B91B9B5498FD34750B76 Date of Disbursement
	Mailing Address 250 Columbia St.				$ \begin{bmatrix} M & M \\ 0 & 9 \end{bmatrix} $ $ \begin{bmatrix} D & D \\ 0 & 5 \end{bmatrix} $ $ \begin{bmatrix} Y & Y \\ 2 & 0 & 0 & 6 \end{bmatrix} $
	City Cohoes	State NY	Zip Code 12047		Amount of Each Disbursement this Period
	Purpose of Disbursement sympathy basket			, ,	48.60
	Candidate Name			Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Dis	Sbursement For: X Primary Other (spec	2006 General		
_	State: District:				
s	UBTOTAL of Disbursements This Page (opti	ional)			1860.10

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nage#	20930422598						
	HEDULE B (MIZED DISB		rs Use s	eperate schedule(s) ch category of the ed Summary Page	FOR LINE (check on	NUMBER: ly one) X 17 18 20a 20b	PAGE 30 / 50
or fo		es, other than usin ΓΕΕ (In Full)				for the purpose of	solicating contributions from such committee
A. _F	Full Name (Last, Firs Fort Orange Press Mailing Address		Road			Transaction I Date of Disbut	
- - -	Dity Albany	P.O. Box 828	State NY	Zip Code 12201		Amount of Eac	ch Disbursement this Period
C	Purpose of Disburser campaign mailing lit. Candidate Name	ment			Category/ Type		Disposal of Excess ns Required Under
	Office Sought: State: Di	House Senate President strict:	Disbursement Fo				
B. _F	Full Name (Last, Firs Fulton Co. Region Mailing Address					Transaction I Date of Disbut	
C C F ti	City Gloversville Purpose of Disburser icket 9/15/06 event Candidate Name		State NY	Zip Code 12078	Category/ Type	Refund or	th Disbursement this Period 15.00 Disposal of Excess ns Required Under 400.53
	Office Sought: State: Di	House Senate President strict:	Disbursement Fo X Primary Other (.,,,,,		
C . (Full Name (Last, Firs Gramercy Commu Mailing Address		venue			Date of Disbur	D: B949E638214BB4F92B1 sement 2 8
F	Dity Albany Purpose of Disburser consulting fees Candidate Name	ment	State NY	Zip Code 12203	Category/ Type	Refund or	th Disbursement this Period 1500.00 Disposal of Excess ns Required Under 400.53
	Office Sought: State: Di	House Senate President strict:	Disbursement Fo X Primary Other (

14896.20

SUBTOTAL of Disbursements This Page (optional)

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use seperate schedule(s) for each category of the Detailed Summary Page	(check only	NUMBER: PAGE 31 / 50 y one) X 17
	y Information copied from such Reports and Statem for commercial purposes, other than using the name			for the purpose of solicating contributions
\rangle	NAME OF COMMITTEE (In Full) MCNULTY FOR CONGRESS			
۸.	Full Name (Last, First, Middle Initial) Gramercy Communications Mailing Address 119 Winthrop Avenue			Transaction ID: BBE05B7E67AB74D33A9 Date of Disbursement M 9 M / D 0 6 Y 2 0 0 6 Y
	•	State Zip Code NY 12203		Amount of Each Disbursement this Period
	Purpose of Disbursement Consulting fees			171.79 Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	- H	ment For: 2006 Primary General Other (specify)		
3.	Full Name (Last, First, Middle Initial) Guilderland Democratic Committee			Transaction ID: B681611B77D0D4541B7 Date of Disbursement
	Mailing Address Box 741			$\begin{bmatrix} \begin{smallmatrix} M \\ O \end{smallmatrix} \begin{smallmatrix} M \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D \\ D \end{smallmatrix} 2 \ 1 \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y \\ D \end{smallmatrix} 2 \ 0 \ 0 \ 6 \end{bmatrix} $
	,	State Zip Code NY 12084		Amount of Each Disbursement this Period
	Purpose of Disbursement Ad-10/5/06 event		•	200.00 Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Senate President	ment For: 2006 Primary X General Other (specify)		
	State: District: Full Name (Last, First, Middle Initial)			Transaction ID: BA932ACF94AE249BD8I
_	Homeless Action Committee			Date of Disbursement
	Mailing Address 393 N. Pearl St.			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 9 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} D & D \\ 1 & 9 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Q & O & G \\ Y & 2 & O & O & G \end{bmatrix}$
		State Zip Code NY 12207		Amount of Each Disbursement this Period
	Purpose of Disbursement benefactor 10/13/06 event		-	100.00 Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Senate President	ment For: 2006 Primary X General Other (specify)		
	State: District:			

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS	I ICA CANATSTA CONACIIIA(C) I	DR LINE NUMBER: PAGE 32 / 50 heck only one) X 17
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam		
NAME OF COMMITTEE (In Full) MCNULTY FOR CONGRESS		
Full Name (Last, First, Middle Initial) 4. Human Rights Campaign PAC		Transaction ID: B2E668612106D4E21A Date of Disbursement
Mailing Address 1640 Rhode Island Aven	ue, NW	0 9 M / D 2 5 / Y Y O O 6 Y
City Washington	State Zip Code DC 20036	Amount of Each Disbursement this Period
Purpose of Disbursement In-kind:in-kind website endorsement li Candidate Name	Categ	
Office Sought: House Disburse Senate President State: District:	ement For: 2006 Primary X General Other (specify)	je – La da
Full Name (Last, First, Middle Initial) Legnard-Curtin Post American Legion		Transaction ID: B621C0982039A4D568 Date of Disbursement
Mailing Address Cohoes Rd		0 9 1 3 7 2 0 0 6 4
City Green Island	State Zip Code NY 12183	Amount of Each Disbursement this Period
Purpose of Disbursement catering for 9/12/06 event		770.00 Refund or Disposal of Excess
Candidate Name	Cateç Tyr	11 (L D 100 62
Office Sought: House Disburse Senate President State: District:	ement For: 2006 Primary X General Other (specify) ▼	
Full Name (Last, First, Middle Initial) Mila's Catering		Transaction ID: BF4AFE2CD05E14E33 Date of Disbursement
Mailing Address 1720 Lanier Pl. NW		09
City Washington	State Zip Code DC 20009	Amount of Each Disbursement this Period
Purpose of Disbursement 7/19/06 DC-FR catering		885.00 Refund or Disposal of Excess
Candidate Name	Cateo Typ	7
	ement For: 2006 Primary General Other (specify)	

SCHEDULE B (FECFORIII 3)	Use seperate schedule(s)	FOR LINE N	
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only o	
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full) MCNULTY FOR CONGRESS	,,		
Full Name (Last, First, Middle Initial) Neil Brown Pianist Mailing Address 111 Fernbank Ave.			Transaction ID: B4F370C8664F2457C83 Date of Disbursement M M M / D D D / Y Y Y O O O
City	State Zip Code		Amount of Each Disbursement this Period
Delmar Purpose of Disbursement entertainment/9/10/06 summer picnic FR Candidate Name	NY 12054	Category/	375.00 Refund or Disposal of Excess Contributions Required Under
1.000	ement For: 2006 Primary General Other (specify)	Туре	11 C.F.R. 400.53
Full Name (Last, First, Middle Initial) 3. New York Civil Liberties Union			Transaction ID: B63246FEA1E214B64AA
Mailing Address 90 State Street			$\begin{bmatrix} 0 & 9 & M \end{bmatrix}$ $\begin{bmatrix} 0 & 2 & 1 \end{bmatrix}$ $\begin{bmatrix} 1 & 2 & 0 & 0 & 6 \end{bmatrix}$
City Albany Purpose of Disbursement Hon.Com11/15/06 event Candidate Name	State Zip Code NY 12207	Category/	Amount of Each Disbursement this Period 100.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Disburse Senate President State: District:	ement For: 2006 Primary X General Other (specify)	7,7-2	
Full Name (Last, First, Middle Initial) Ponies for Hire			Transaction ID: BFE794A2D1507482D83 Date of Disbursement
Mailing Address c/o Sue Mason 2016 Berne Altamont Rd			$\begin{bmatrix} 0.9 & \text{M} \\ 0.9 & \text{M} \end{bmatrix} / \begin{bmatrix} \text{D} & \text{D} \\ 1.1 & \text{D} \end{bmatrix} / \begin{bmatrix} \text{Y} & \text{Y} & \text{Y} & \text{Y} \\ 2.0 & \text{O} & \text{G} \end{bmatrix}$
	State Zip Code NY 12009		Amount of Each Disbursement this Period
Purpose of Disbursement 9/10/06 Picnic event Candidate Name	C	Category/	Refund or Disposal of Excess Contributions Required Under
ÿ	ement For: 2006 Primary General Other (specify)	Туре	11 C.F.R. 400.53
SUBTOTAL of Disbursements This Page (optional)			675.00
TOTAL This Period (last page this line number only)			

S	CHEDULE B (FEC Form 3)	Llea capareta cabadula(a)	, FOR LINE	NUMBER: PAGE 34/50
IT	EMIZED DISBURSEMENTS	Use seperate schedule(s) for each category of the Detailed Summary Page	(Crieck orig	y one)
_				20a 20b 20c 21
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam			
abla	NAME OF COMMITTEE (In Full)			
$ \rangle$	MCNULTY FOR CONGRESS			
Α.	Full Name (Last, First, Middle Initial)			Transaction ID: B270C8C3C4A484856A19
۸.	Postmaster		Date of Disbursement	
	Mailing Address 400 Broadway			$\begin{bmatrix} \begin{smallmatrix} M & 9 & M \\ 0 & 9 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 6 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} \end{bmatrix}$
	City	State Zip Code NY 12180-9998	,	Amount of Each Disbursement this Period
	Troy Purpose of Disbursement	12100-9990	<u> </u>	78.00
	stamps			Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburs	ement For: 2006	1,762	
	Senate	Primary X General		
	President State: District:	Other (specify)		
	Full Name (Last, First, Middle Initial)			T ID DO0F0040F40FF4FF5000
В.	REM Printing, Inc.			Transaction ID: B93F2348F4C5E4FF5932 Date of Disbursement
	Mailing Address 55 Railroad Avenue			$\begin{array}{c c} & \begin{array}{c c} & \\ \end{array} & \begin{array}{c c} \\ \end{array} & \begin{array}{c cc \\ \end{array} & \begin{array}{c c$
	City	State Zip Code		Amount of Each Disbursement this Period
	Albany Purpose of Disbursement	NY 12205		299.16
	printing picnic tickets		Refund or Disposal of Excess	
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
		ement For: 2006		
	Senate X President	☐ Primary ☐ General Other (specify) ▼		
	State: District:	Other (specify)		
С.	Full Name (Last, First, Middle Initial) SACC-Channel 16			Transaction ID: B725CB437C65844AD8D Date of Disbursement
				M M / D D / Y Y Y Y
	Mailing Address 115 N. Broadway			09 13 2006
	City Schenectady	State Zip Code NY 12305		Amount of Each Disbursement this Period
	Purpose of Disbursement			100.00
	2006 membership renewal			Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburs	ement For: 2006	•	
	Senate	Primary X General		
	State: President State:	Other (specify) ▼		
Г	5.5			
s	UBTOTAL of Disbursements This Page (optional)			477.16

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use seperate schedule(s) for each category of the Detailed Summary Page	FOR LINE N (check only o	one)
	y Information copied from such Reports and Statem for commercial purposes, other than using the name			
\rangle	NAME OF COMMITTEE (In Full) MCNULTY FOR CONGRESS			
Α.	Full Name (Last, First, Middle Initial) SEIU Communications Center, Inc. Mailing Address 330 West 42nd Street, 7th	:h fl.		Transaction ID: BA3303DAA379F4BBB992 Date of Disbursement M M M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		State Zip Code NY 10036-6902		Amount of Each Disbursement this Period
	ÿ	ement For: 2006 Primary General	Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	President State: District: Full Name (Last, First, Middle Initial)	Other (specify) ▼		
3.	Sierra Club Political Committee Mailing Address 408 C Street, NE			Transaction ID: B07AFF7AFC4C54C5299C Date of Disbursement
	,	State Zip Code DC 20002		Amount of Each Disbursement this Period
	Purpose of Disbursement In-kind:in-kind website endorsements Candidate Name		Category/	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Senate President State: District:	ement For: 2006 Primary X General Other (specify)	71.	
Э.	Full Name (Last, First, Middle Initial) St. Peter's Hospital Foundation			Transaction ID: BFF001B1C59654654AC8 Date of Disbursement
	Mailing Address 317 South Manning Boul	evard		$\begin{bmatrix} \begin{smallmatrix} M \\ O \end{smallmatrix} \begin{smallmatrix} M \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D \\ D \end{smallmatrix} \begin{smallmatrix} D \\ D \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y \\ D \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} Y \\ D \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} Y \\ D \end{smallmatrix} \begin{smallmatrix} Y \\ D \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} Y \\ D \end{smallmatrix} \begin{smallmatrix} Y \\ D \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} Y \\ D \end{smallmatrix} \begin{smallmatrix} Y \\ D \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} Y \\ D \end{smallmatrix} \begin{smallmatrix} Y \\ D \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} Z \\ D \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} Z \\ D \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} Z \\ D \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} Z \\ D \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} Z \\ Z \\ Z \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} Z \\ Z \\ Z \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} Z \\ Z \\ Z \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} Z \\ Z \\ Z \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} Z \\ Z \\ Z \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} Z \\ Z \\ Z \end{smallmatrix} \end{smallmatrix}$
		State Zip Code NY 12208		Amount of Each Disbursement this Period
	Purpose of Disbursement Hon.Com. 11/24/06 event			150.00 Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Senate President	ement For: 2006 Primary X General Other (specify)		
	State: District:			
S	UBTOTAL of Disbursements This Page (optional) .			2310.44

SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	I I I I I I I I I I I I I I I I I I I	DR LINE NUMBER: PAGE 36 / 50 heck only one) X 17
Any Information copied from such Reports and Stator for commercial purposes, other than using the na		
NAME OF COMMITTEE (In Full) MCNULTY FOR CONGRESS		
Full Name (Last, First, Middle Initial) Sysco Food Services of Albany, LLC		Transaction ID: BC04D4E7607594DD09 Date of Disbursement
Mailing Address One Liebich Lane		099 08 7 2006
City Halfmoon	State Zip Code NY 12065	Amount of Each Disbursement this Period
Purpose of Disbursement food supplies 9/10/06 Campaign F/R Summe Candidate Name	Cate ₍	
Office Sought: House Disbu Senate President State: District:	rsement For: 2006 X Primary General Other (specify)	
Full Name (Last, First, Middle Initial) The Jewish World, Inc.		Transaction ID: B739E7069E3264433A6 Date of Disbursement
Mailing Address 3 Vatrano Rd.		0 9 M / D 2 5 / Y 2 0 0 6 Y
City Albany	State Zip Code NY 12205-3497	Amount of Each Disbursement this Period
Purpose of Disbursement AD-grtg.		270.00 Refund or Disposal of Excess
Candidate Name	Cates Typ	11 (L D 100 60
Office Sought: House Disbu Senate President State: District:	rsement For: 2006 Primary X General Other (specify) ▼	
Full Name (Last, First, Middle Initial) - The Mailworks		Transaction ID: B9CC3F10FB8884F899 Date of Disbursement
Mailing Address 45 Prospect Ave.		08 8 24 2006 6
City Albany	State Zip Code NY 12206	Amount of Each Disbursement this Period
Purpose of Disbursement campaign mailing		1437.17 Refund or Disposal of Excess
Candidate Name	Cates Typ	7
Office Sought: House Disbu Senate President State: District:	rsement For: 2006 X Primary General Other (specify)	
_L		3208.94

	E B (FEC Form 3) DISBURSEMENTS	Use seperate schedule(s) for each category of the Detailed Summary Page	(check only	NUMBER: PAGE 37 / 50 y one) X 17 18 19a 19b 20a 20b 20c 21
or for commercia	al purposes, other than using the nar			or the purpose of solicating contributions licit contributions from such committee
\	OMMITTEE (In Full) FOR CONGRESS			
Full Name (I A. The Mailw	ast, First, Middle Initial) orks			Transaction ID: B6E4250AD02AC4D969 Date of Disbursement
Mailing Addr	ess 45 Prospect Ave.			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & R \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & R \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & O & O & G \\ Y & Z & O & O & G \end{bmatrix}$
City Albany		State Zip Code NY 12206		Amount of Each Disbursement this Period
Purpose of I mailing servi			Category/	Refund or Disposal of Excess Contributions Required Under
Office Soug		sement For: 2006 C Primary General Other (specify)	Туре	11 C.F.R. 400.53
Full Name (I B. The Mailw	ast, First, Middle Initial) orks			Transaction ID: B09A262D865DC4E19E Date of Disbursement
Mailing Add	ess 45 Prospect Ave.			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & R \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ O & S \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ Z & O & O & G \end{smallmatrix} \end{bmatrix}$
City Albany		State Zip Code NY 12206		Amount of Each Disbursement this Period
	Disbursement npaign mailing ame		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Soug		sement For: 2006 K Primary General Other (specify)		
Full Name (I The Mailw	ast, First, Middle Initial) orks			Transaction ID: B34FC268B787442D2A Date of Disbursement
Mailing Add	ess 45 Prospect Ave.			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & R \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ J & I \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ D & O & O & G \end{smallmatrix} \end{bmatrix}$
City Albany		State Zip Code NY 12206		Amount of Each Disbursement this Period
	Disbursement ailing services ame		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sough		sement For: 2006 K Primary General Other (specify)	1 340	
CURTOTAL	Disbursements This Page (optional)			1764.66

CHEDULE B (FEC Form 3)	Use seperate schedule(s)	FOR LINE N		PAGE 38 / 50
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only c	17 18 20a 20b	19a 19b 20c 21
ny Information copied from such Reports and State for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full) MCNULTY FOR CONGRESS				
Full Name (Last, First, Middle Initial) The Mailworks			Transaction ID: I Date of Disburser	
Mailing Address 45 Prospect Ave.			09 0	5 2006
City Albany	State Zip Code NY 12206		Amount of Each [Disbursement this Period
Purpose of Disbursement campaign mailing services Candidate Name		Category/		1437.17 posal of Excess Required Under
	sement For: 2006 X Primary General Other (specify)	Туре	11 0.1 .11. 400	
Full Name (Last, First, Middle Initial) The Record			Date of Disburser	
Mailing Address 501 Broadway			09 7 2	5 2006
City Troy	State Zip Code NY 12180-3381		Amount of Each I	Disbursement this Period
Purpose of Disbursement subscription renewal			Refund or Dis	266.80 posal of Excess
Candidate Name	C	Category/ Type	Contributions 11 C.F.R. 400	Required Under 0.53
Office Sought: House Disbur Senate President State: District:	sement For: 2006 Primary X General Other (specify) ▼			
Full Name (Last, First, Middle Initial) Time Warner Cable			Date of Disburser	
Mailing Address 130 Washington Ave. E	Ext.		08 7 3	0 2006
City Albany	State Zip Code NY 12203-5336		Amount of Each I	Disbursement this Period
Purpose of Disbursement internet service			Refund or Dis	44.95 posal of Excess
Candidate Name	C	Category/ Type		Required Under
Ŭ → I F	sement For: 2006 X Primary General Other (specify)			
SUBTOTAL of Disbursements This Page (optional)			1748.92
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CHEDULE B (FECForm 3)	Use seperate schedule(s)	FOR LINE NU		PAGE 39 / 50
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		17	19a 19b 20c 21
ny Information copied from such Reports and Staten for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full) MCNULTY FOR CONGRESS				
Full Name (Last, First, Middle Initial) Time Warner Cable			Transaction ID: Bo	66194B8A3D7E420Al
Mailing Address 130 Washington Ave. Ex	t.		09 / 25	['] 2006
City Albany	State Zip Code NY 12203-5336		Amount of Each Di	sbursement this Period
Purpose of Disbursement internet service Candidate Name	C	ategory/	Refund or Dispo Contributions R 11 C.F.R. 400.5	equired Under
Office Sought: House Disburse Senate President State: District:	ement For: 2006 Primary X General Other (specify)	Туре	11 0.1 .11. 400.0	
Full Name (Last, First, Middle Initial) Tom Killips Photography			Transaction ID: Balance	415AB845861E465El ent
Mailing Address 142 Oakwood Avenue			09 / 21	Y 2006
City Troy	State Zip Code NY 12180		Amount of Each Di	sbursement this Period
Purpose of Disbursement campaign photos Candidate Name	C	ategory/	Refund or Dispo Contributions R 11 C.F.R. 400.5	equired Under
Office Sought: House Senate President State: District:	ement For: 2006 Primary X General Other (specify)	Туре	11 G.F.N. 400.8	55
Full Name (Last, First, Middle Initial) TRIP, Inc.			Date of Disburseme	
Mailing Address 415 River Street			09 13	2006
City Troy	State Zip Code NY 12180		Amount of Each Di	sbursement this Period
Purpose of Disbursement Hon.Com. 10/26/06 event			Refund or Disp	
Candidate Name		ategory/ Type	Contributions R 11 C.F.R. 400.5	
Office Sought: Senate President State: Disburse Senate President	ement For: 2006 Primary X General Other (specify)			
SUBTOTAL of Disbursements This Page (optional)				374.95
FOTAL This Period (last page this line number only)				
(3 - 1 1 1 1 1 1 1 1 1				

SCHEDULE B (FEC Form 3)	Use seperate schedule(s)	FOR LINE (check only	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		X 17
Any Information copied from such Reports and State or for commercial purposes, other than using the results of the such as the			
NAME OF COMMITTEE (In Full)			
MCNULTY FOR CONGRESS			
Full Name (Last, First, Middle Initial) A. U.S. Postmaster			Transaction ID: BC4DE3C668A3640B99 Date of Disbursement
Mailing Address 137 George St.			$\begin{bmatrix} \begin{smallmatrix} M & 8 & M \\ 0 & 8 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} \end{bmatrix}$
City Green Island	State Zip Code NY 12183		Amount of Each Disbursement this Period
Purpose of Disbursement postage/campaign mailing		•	8846.34 Refund or Disposal of Excess
Candidate Name	,	Category/ Type	Contributions Required Under 11 C.F.R. 400.53
Senate President	ursement For: 2006 X Primary General Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial) B. U.S. Postmaster			Transaction ID: B7699677A890B4AFC9 Date of Disbursement
Mailing Address 137 George St.			08
City Green Island	State Zip Code NY 12183		Amount of Each Disbursement this Period
Purpose of Disbursement mailing/invites			542.59 Refund or Disposal of Excess
Candidate Name	'	Category/ Type	Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Disb Senate President	ursement For: 2006 X Primary General Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial) C. U.S. Postmaster			Transaction ID: B87B74488990F45D98 Date of Disbursement
Mailing Address 137 George St.			08
City Green Island	State Zip Code NY 12183		Amount of Each Disbursement this Period
Purpose of Disbursement	ı		8846.34
campaign mailing/postage Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Disb Senate President	ursement For: 2006 X Primary General Other (specify)	. 71-3	
State: District:			
SUBTOTAL of Disbursements This Page (option	nal)	>	18235.27

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3)	Use seperate schedule(s)		NUMBER: PAGE 41 / 50
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	X 17 18 19a 19b 20a 20b 20c 21
Any Information copied from such Reports and Sor for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) MCNULTY FOR CONGRESS			
Full Name (Last, First, Middle Initial) A. U.S. Postmaster			Transaction ID: BA202C0C7159B45C98A Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 137 George St.			2000
City Green Island	State Zip Code NY 12183		Amount of Each Disbursement this Period
Purpose of Disbursement campaign mailing/postage Candidate Name	[Category/	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Senate President	sbursement For: 2006 X Primary General Other (specify)	Туре	11 C.F.N. 400.53
State: District: Full Name (Last, First, Middle Initial)			Transaction ID: B301AE9260C84418D91
B. U.S. Postmaster			Date of Disbursement
Mailing Address 137 George St.			09 05 2006
City Green Island	State Zip Code NY 12183		Amount of Each Disbursement this Period
Purpose of Disbursement postage/campaign mailing	Г	•	Refund or Disposal of Excess
Candidate Name	L.	Category/ Type	Contributions Required Under 11 C.F.R. 400.53
Senate President	sbursement For: 2006 X Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			
C. Verizon			Transaction ID: BF742BC80F0D74402A3 Date of Disbursement
Mailing Address PO Box 1100			$\begin{bmatrix}\begin{smallmatrix}M\\O\end{smallmatrix}8^M\\\end{smallmatrix} \begin{bmatrix}\begin{smallmatrix}D\\O\end{smallmatrix}2^D\\\end{smallmatrix} \begin{bmatrix}\begin{smallmatrix}D\\O\end{smallmatrix}2^D\\\end{smallmatrix} \begin{bmatrix}\begin{smallmatrix}Y\\O\end{smallmatrix}2^Y\\O\end{smallmatrix}0^Y\\0^Y\\\end{smallmatrix} \begin{bmatrix}\begin{smallmatrix}Y\\O\end{smallmatrix}2^Y\\O\end{smallmatrix}0^Y\\0^Y\\\end{smallmatrix} \begin{bmatrix}\begin{smallmatrix}Y\\O\end{smallmatrix}1^Y\\O\end{smallmatrix}1^Y\\0^$
City Albany	State Zip Code NY 12250-0001		Amount of Each Disbursement this Period
Purpose of Disbursement	Г	• •	62.05
phone charges Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Dis Senate President	sbursement For: 2006 X Primary General Other (specify)		
State: District:	(1 · 3) ¥		
SUBTOTAL of Disbursements This Page (opti	ional)	>	9559.56

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3)	Use seperate schedule(s)		PAGE 42 / 50
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only one) X 17 18 19a 19a 20b 20b 20c 20	
Any Information copied from such Reports and Stater or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full) MCNULTY FOR CONGRESS			
Full Name (Last, First, Middle Initial) Verizon		Transaction ID: B6750 Date of Disbursement	
Mailing Address PO Box 1100		08 / 29 /	2006
City Albany	State Zip Code NY 12250-0001	Amount of Each Disburs	
Purpose of Disbursement phone charges Candidate Name	l l	Refund or Disposal of Contributions Required 11 C.F.R. 400.53	
	ement For: 2006 Primary General Other (specify)	ype 11 C.F.A. 400.55	
Full Name (Last, First, Middle Initial) Verizon		Transaction ID: B477A Date of Disbursement	1CD1F6074DB880
Mailing Address PO Box 1100		09 / 19 /	2006
City Albany	State Zip Code NY 12250-0001	Amount of Each Disburs	ement this Period
Purpose of Disbursement phone charges		Refund or Disposal of	
Candidate Name		regory/ Contributions Requir 11 C.F.R. 400.53	ed Under
Office Sought: House Disburs Senate President State: District:	ement For: 2006 Primary X General Other (specify) ▼		
Full Name (Last, First, Middle Initial) Verizon		Transaction ID: B3D8I Date of Disbursement	3513A4D4B4D319 <i>A</i>
Mailing Address PO Box 1100		09 / 25 /	^Y 2006 ^Y
City Albany	State Zip Code NY 12250-0001	Amount of Each Disburs	ement this Period
Purpose of Disbursement phone charges		Refund or Disposal of	
Candidate Name		regory/ Type Contributions Requir 11 C.F.R. 400.53	ed Under
Office Sought: House Disburs Senate President State: District:	ement For: 2006 Primary X General Other (specify)		
SUBTOTAL of Disbursements This Page (optional)			205.37
TOTAL This Period (last page this line number only			

Check only one) Check only one) Check only one) Transaction (check one) Transaction (check only one) Transaction (check one) Transaction (check one) Transaction (check one) Transaction (check only one) Transaction (check one) Tr	CHEDULE B (FEC Form 3)	Use seperate schedule(s)	FOR LINE N		PAGE 43 / 50
for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (in Full) MCNULTY FOR CONGRESS Full Name (Last, First, Middle Initial) Verizon Mailing Address PO Box 1100 City Amount of Each Disbursement phone charges Candidate Name Disbursement Primary Verizon Mailing Address PO Box 1100 Transaction ID: BB7DE5AC20A5441E Date of Disbursement this Period Amount of Each Disbursement this Period To y 1 2 5 1 2 0 6 9 Amount of Each Disbursement this Period To y 2 5 1 2 0 0 6 9 Amount of Each Disbursement this Period Transaction ID: B24B69458267745BC Category' Type Transaction ID: B24B69458267745BC Categor	EMIZED DISBURSEMENTS		1 ` <u>-</u>	17 18	
Full Name (Last, First, Middle Initial) Verizon Mailing Address PO Box 1100 City State Zip Code Albany NY 12250-0001 Purpose of Disbursement phone charges Cardidate Name District: Full Name (Last, First, Middle Initial) Verizon Mailing Address PO Box 1100 Transaction ID: BB7DE5AC20A5441E Date of Disbursement this Period Albany Amount of Each Disbursement this Period R8.8.68 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Transaction ID: B24B69458267745BC Date of Disbursement For: 2006 Primary Yill State Zip Code NY 12250-0001 NY 12250-0001 Amount of Each Disbursement For: 2006 Primary Xillender Septiment For: 2006 Septiment For: 200					
Verizon Date of Disbursement Date of D	, ,				
City				Date of Disbursem	ent
Albany Purpose of Disbursement Prince Sarges Candidate Name Office Sought: House Senate Primary X General Primary X General Primary X General Primary X General Disbursement this Period Albany Mailing Address PO Box 1100 City Albany NY 12250-0001 Purpose of Disbursement NY 12250-0001 Purpose of Disbursement Office Sought: House Senate Primary X General Primary X General Disbursement Office Sought: House Senate Primary X General Disbursement Office Sought: President State: District: Full Name (Last, First, Middle Initial) Verizon Office Sought: House Senate Primary X General Disbursement President State: District: Full Name (Last, First, Middle Initial) VildSands, LLC Mailing Address 48 Elm Street City Albany NY 12202 Purpose of Disbursement Photographi/Campaign Category/ Type Transaction ID: B24B69458267745BC Date of Disbursement this Period 11 C.F.R. 400.53 Transaction ID: B95FEFF1903E04CA Date of Disbursement Office Sought: President State District: Transaction ID: B95FEFF1903E04CA Date of Disbursement Office Sought: President State Disbursement Office Sought: House Senate Primary General Primary General President State Disbursement For: 2006 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Transaction ID: B95FEFF1903E04CA Date of Disbursement Office Sought: President State Disbursement For: 2006 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	Mailing Address PO Box 1100			09 / 25	2006
phone charges Candidate Name Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Verizon Category' Type Transaction ID: B24B69458267745BC Date of Disbursement For: 2006 Albany State Zip Code Albany Purpose of Disbursement For: 2006 Candidate Name Office Sought: House Senate President Disbursement For: 2006 Senate President Disbursement For: 2006 Category' Type Transaction ID: B24B69458267745BC Date of Disbursement Ibis Period Amount of Each Disbursement Ibis Period Category' Type Transaction ID: B95FEFF1903E04CA Date of Disbursement I C.F.R. 400.53 Transaction ID: B95FEFF1903E04CA Date of Disbursement Ibis Period Amount of Each Disbursement Ibis Period Transaction ID: B95FEFF1903E04CA Date of Disbursement Ibis Period Amount of Each Disbursement Ibis Period Transaction ID: B95FEFF1903E04CA Date of Disbursement Ibis Period Amount of Each Disbursement Ibis Period Transaction ID: B95FEFF1903E04CA Date of Disbursement Ibis Period Amount of Each Disbursement Ibis Period Transaction ID: B95FEFF1903E04CA Date of Disbursement Ibis Period Amount of Each Disbursement Ibis Period Transaction ID: B95FEFF1903E04CA Date of Disbursement Ibis Period Transaction ID: B95				Amount of Each D	isbursement this Period
Office Sought:	phone charges			Contributions F	oosal of Excess Required Under
Verizon Mailing Address PO Box 1100 City State Zip Code NY 12250-0001 Purpose of Disbursement cellular charges Candidate Name Office Sought: House Senate President District: Full Name (Last, First, Middle Initial) WildSands, LLC Mailing Address 48 Elm Street City State Zip Code NY 12202 Mailing Address 48 Elm Street City State Zip Code NY 12202 Mailing Address 48 Elm Street City State Zip Code Albany NY 12202 Furpose of Disbursement For: 2006 City State Zip Code Albany NY 12202 Furpose of Disbursement Poisbursement Poisbursem	Senate President	Primary X General	Туре	11 6.1 .11. 400.	
City State Zip Code NY 12250-0001 Purpose of Disbursement cellular charges Candidate Name Category/ Type Office Sought: House Senate Primary X General Other (specify) ▼ City Albany State Zip Code NY 12202 Full Name (Last, First, Middle Initial) WildSands, LLC Mailing Address 48 Elm Street City State Zip Code NY 12202 City State Zip Code NY 12202 Amount of Each Disbursement this Period Amount of Each Disbursement this Period Transaction ID: B95FEFF1903E04CA Date of Disbursement Mailing Address 48 Elm Street Category/ Type Amount of Each Disbursement this Period Amount of Each Disbursement Mailing Address 48 Elm Street Category/ Type Amount of Each Disbursement this Period Amount of Each Disbursement this Period Category/ Type Tother (specify) ▼ Category/ Type Office Sought: House Senate President Senate President Other (specify) ▼ State: District: Disbursements This Page (optional) ▼ 711.24	,			Date of Disbursem	ent
Albany Purpose of Disbursement cellular charges Candidate Name Office Sought: House President State: District: Full Name (Last, First, Middle Initial) WildSands, LLC Mailing Address City Albany Purpose of Disbursement Ny 122.56 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Transaction ID: B95FEFF1903E04CA Date of Disbursement Mailing Address 48 Elm Street Other (specify) Vides and a sequired Under 11 C.F.R. 400.53 Transaction ID: B95FEFF1903E04CA Date of Disbursement Mailing Address 48 Elm Street Other (specify) Vides and a sequired Under 122.56 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Amount of Each Disbursement this Period Amount of Each Disbursement this Period Type Office Sought: House Senate President State: District: UBTOTAL of Disbursements This Page (optional) NY 12210 Amount of Each Disbursement this Period Type Type Type Transaction ID: B95FEFF1903E04CA Date of Disbursement Other (specify) Type Transaction ID: B95FEFF1903E04CA Date of Disbursement Mailing Address Amount of Each Disbursement this Period Type Type Type Transaction ID: B95FEFF1903E04CA Date of Disbursement Other (specify) Type Transaction ID: B95FEFF1903E04CA Date of Disbursement Transaction ID: B95FEFF1903E04CA Date of Disbursement Other (specify) Type Transaction ID: B95FEFF1903E04CA Date of Disbursement Other (specify) Type Transaction ID: B95FEFF1903E04CA Date of Disbursement Other (specify) Transaction ID: B95FEFF1903E04CA Date of Disbursement Other (specify) Transaction ID: B95FEFF1903E04CA Date of Disbursement Transaction ID: B95FEFF1903E04CA Date of Disbursement Other (specify) Transaction ID: B95FEFF1903E04CA Date of Disbursement Transaction ID: B95FEFF1903E04CA Date of Disbursement Other (specify) Transaction ID: B95FEFF1903E04CA Date of Disbursement Other (specify) Transaction ID: B95FEFF1903E04CA Date of Disbursement Other (specify) Transaction ID: B95FEFF1903E04CA Date of Disbursement Other (specify)	Mailing Address PO Box 1100			0 9 2 5	2006
Calcegory/ Type Category/ Type Transaction ID: B95FEFF1903E04CA Date of Disbursement Other (specify) ▼ Category/ Date of Disbursement Mailing Address 48 Elm Street City Albany Category/ Purpose of Disbursement Photograph/Campaign Candidate Name Category/ Type Amount of Each Disbursement this Period Category/ Type To Disbursement Excess Contributions Required Under 11 C.F.R. 400.53				Amount of Each D	
Office Sought: House Senate Primary X General Other (specify) ▼ State: District: Other (specify) ▼ Full Name (Last, First, Middle Initial) WildSands, LLC Mailing Address 48 Elm Street City State Zip Code NY 12202 Purpose of Disbursement Photograph/Campaign Candidate Name Category/ Type Transaction ID: B95FEFF1903E04CA Date of Disbursement Under 11 C.F.R. 400.53 Amount of Each Disbursement this Period Photograph/Campaign Category/ Type Office Sought: House Senate President Other (specify) ▼ State: District:	cellular charges		• •		osal of Excess
Senate Primary X General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) WildSands, LLC Mailing Address 48 Elm Street City State Zip Code Albany NY 12202 Purpose of Disbursement Photograph/Campaign Candidate Name Office Sought: House Senate Primary General Other (specify) ▼ State: District: District: Primary X General Other (specify) ▼ Transaction ID: B95FEFF1903E04CA Date of Disbursement Ma M / 2 9 / 2 0 0 6 Y Amount of Each Disbursement this Period Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Total Contributions Required Under 11 C.F.R. 400.53					
WildSands, LLC Mailing Address 48 Elm Street City State Zip Code Albany NY 12202 Purpose of Disbursement Photograph/Campaign Candidate Name Office Sought: House Senate President President President State: District: Date of Disbursement M M M / D 2 D / Y 2 0 0 6 Y Amount of Each Disbursement this Period Category/ Type Category/ Type Category/ Type Tother (specify) ▼	Senate President	Primary X General			
City State Zip Code NY 12202 Purpose of Disbursement Photograph/Campaign Candidate Name Disbursement For: 2006 Senate President President State: District: District: State Zip Code NY 12202 Amount of Each Disbursement this Period Category/ Type Category/ Type Totale Amount of Each Disbursement this Period South of Disposal of Excess Contributions Required Under 11 C.F.R. 400.53				Date of Disbursem	ent
Albany NY 12202 Purpose of Disbursement Photograph/Campaign Candidate Name Office Sought: House Senate President Phosphare Disbursement For: 2006 Senate President State: District: District: Table 12202 Senate President State: Disbursements This Page (optional) Table 12202 Senate President State: Disbursement For: 2006 Table 12202 Setting 12202 Table 12202 Table 12202 Setting 12202 Table 12202 Tabl	Mailing Address 48 Elm Street			08 / 29	2006
Photograph/Campaign Candidate Name Category/ Type Category/ Type Category/ Type Category/ Type Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Senate President Other (specify) State: District: District:				Amount of Each D	isbursement this Period
Office Sought: House Disbursement For: 2006 Senate President Other (specify) State: District: UBTOTAL of Disbursements This Page (optional)	Photograph/Campaign	[Contributions F	osal of Excess Required Under
SET CTAL OF DISBUTSCHICITIS THIS Tage (Optional)	Senate X President	Primary General	гуре		
	UBTOTAL of Disbursements This Page (ontional)				711.24

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS	Use seperate schedule(s) for each category of the Detailed Summary Page	(check only	NUMBER: PAGE 44 / 50 / one) X 17
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			or the purpose of solicating contributions
NAME OF COMMITTEE (In Full) MCNULTY FOR CONGRESS			
Full Name (Last, First, Middle Initial) A. Christopher Daus			Transaction ID: BD36AB90852E647EB9 Date of Disbursement
Mailing Address 1208 Hillside Ave.			$\begin{bmatrix} 0 & 9 & M \\ 0 & 9 & M \end{bmatrix}$ $\begin{bmatrix} 1 & 1 & 1 \\ 0 & 1 & 1 \end{bmatrix}$ $\begin{bmatrix} 1 & 1 & 1 \\ 0 & 2 & 1 \end{bmatrix}$ $\begin{bmatrix} 1 & 1 & 1 \\ 0 & 2 & 1 \end{bmatrix}$
	State Zip Code NY 12189		Amount of Each Disbursement this Period
Purpose of Disbursement re-imbmt./supplies 9/10/06 summer picnic Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	ement For: 2006 Primary General Other (specify)	.,,,,,	
Full Name (Last, First, Middle Initial) B. Gerard McGill			Transaction ID: B485E2804AF674D3C89 Date of Disbursement
Mailing Address			$\begin{bmatrix} 0 & 9 & M \\ 0 & 9 & M \end{bmatrix}$ $\begin{bmatrix} 0 & 0 & 0 \\ 0 & 0 & 5 \end{bmatrix}$ $\begin{bmatrix} 0 & 0 & 0 \\ 0 & 0 & 0 \end{bmatrix}$
,	State Zip Code NY 12189		Amount of Each Disbursement this Period
Purpose of Disbursement catering services/summer picnic Candidate Name		Category/	Refund or Disposal of Excess Contributions Required Under
· —	ement For: 2006 Primary General Other (specify)	Туре	11 C.F.R. 400.53
Full Name (Last, First, Middle Initial) Howard Schaffer			Transaction ID: BA34481329D604A3EB Date of Disbursement
Mailing Address Howard Schaffer Media M 11 Computer Drive West			$\begin{bmatrix} 0 & 8 & M \\ 0 & 8 & M \end{bmatrix}$ $\begin{bmatrix} 0 & 2 & 5 \\ 0 & 2 & 5 \end{bmatrix}$ $\begin{bmatrix} 0 & 2 & 0 & 0 & 6 \\ 0 & 2 & 0 & 0 & 6 \end{bmatrix}$
Albany	State Zip Code NY 12205-1620		Amount of Each Disbursement this Period
Purpose of Disbursement campaign lawn signs Candidate Name		Category/	Refund or Disposal of Excess Contributions Required Under
	ement For: 2006 Primary General Other (specify)	Туре	11 C.F.R. 400.53
SUBTOTAL of Disbursements This Page (optional) .			5005.61
TOTAL This Period (last page this line number only)			65020.83

SCHEDULE B (FECFORIII 3)	Use seperate schedule(s)	FOR LINE (check only	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		17 18 19a 19b 20a 20b 20c X 21
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) MCNULTY FOR CONGRESS			
Full Name (Last, First, Middle Initial) 4. Bethesda House of Schenectady, Inc.			Transaction ID: BACD5F52CFB5D4AD3B0 Date of Disbursement
Mailing Address 418 Liberty Street			$\begin{bmatrix} 0 & 9 & M \\ 0 & 9 & M \end{bmatrix}$ $\begin{bmatrix} 0 & 2 & 0 \\ 0 & 2 & 0 \end{bmatrix}$ $\begin{bmatrix} 0 & 1 & 2 & 0 \\ 0 & 2 & 0 & 0 \end{bmatrix}$
	State Zip Code NY 12305		Amount of Each Disbursement this Period
Purpose of Disbursement donation Candidate Name	C	Category/	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President State: District:	ment For: 2006 Primary X General Other (specify)	Туре	11 0.1 .11. 400.30
Full Name (Last, First, Middle Initial) Capital District Area Labor Federation			Transaction ID: B338D3C99057444E7B68 Date of Disbursement
Mailing Address 24 4th Street			$\begin{bmatrix} 0 & 8 & M \\ 0 & 8 & M \end{bmatrix}$ $\begin{bmatrix} 0 & 2 & 4 \\ 0 & 2 & 4 \end{bmatrix}$ $\begin{bmatrix} 0 & 1 & 2 & 4 \\ 0 & 2 & 0 & 6 \end{bmatrix}$
,	State Zip Code NY 12180		Amount of Each Disbursement this Period 500.00
tickets 10/6/06 event Candidate Name	C	Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	ment For: 2006 Primary General Other (specify)		
Full Name (Last, First, Middle Initial) Colonie Democratic Committee			Transaction ID: B1B8ABAF476374F3AA88 Date of Disbursement
Mailing Address 19 Louise Drive			$\begin{bmatrix} 0 & 8 & M \\ 0 & 8 & M \end{bmatrix} / \begin{bmatrix} D & D & D \\ 2 & 4 & M \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 6 & M \end{bmatrix}$
	State Zip Code NY 12110		Amount of Each Disbursement this Period
Purpose of Disbursement ticket 9/7/06 event		•	100.00 Refund or Disposal of Excess
Candidate Name	C	Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	ment For: 2006 Primary General Other (specify)		
SUBTOTAL of Disbursements This Page (optional) .			700.00
TOTAL This Period (last page this line number only)			

SCHEDULE B (FECFORIII 3)	Use seperate schedule(s)	FOR LINE N	
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	17 18 19a 19b 20a 20b 20c X 21
Any Information copied from such Reports and Statement for for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) MCNULTY FOR CONGRESS			
Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Com	m.		Transaction ID: B557B64464C4D40D085 Date of Disbursement M M M D D D D Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 430 South Capitol St.			09 13 2000
,	State Zip Code DC 20003		Amount of Each Disbursement this Period
Purpose of Disbursement unlimited transfer to Nat'l Party Candidate Name		Category/	S0000.00 Refund or Disposal of Excess Contributions Required Under
Office Sought: House Senate President State: District:	nent For: 2006 Primary X General Other (specify)	Туре	11 C.F.R. 400.53
Full Name (Last, First, Middle Initial) Bevine For Justice			Transaction ID: B33C20DD89BB14A8B84 Date of Disbursement
Mailing Address c/o John Chiaramonte 8 Vatrano Lane			$\begin{bmatrix} 0 & 9 & M \end{bmatrix}$ $\begin{bmatrix} 0 & 1 & 5 \end{bmatrix}$ $\begin{bmatrix} 0 & 1 & 2 & 0 & 0 & 6 & 1 \end{bmatrix}$
•	State Zip Code NY 12211		Amount of Each Disbursement this Period
Purpose of Disbursement ticket 9/19/06 event Candidate Name		Category/	300.00 Refund or Disposal of Excess Contributions Required Under
Office Sought: House Disburser Senate President		Туре	11 C.F.R. 400.53
State: District: Full Name (Last, First, Middle Initial) Disabled American Veterans			Transaction ID: B8147399152C94CE1970 Date of Disbursement
Mailing Address PO Box 14301			$\begin{bmatrix} \begin{smallmatrix} M & S & M \\ O & B \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D & D \\ D & D \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & D & Y \\ D & D & D & G \end{smallmatrix} $
•	State Zip Code OH 45250		Amount of Each Disbursement this Period
Purpose of Disbursement donation	Г	0 0	100.00 Refund or Disposal of Excess
Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	nent For: 2006 Primary General Other (specify)		
SUBTOTAL of Disbursements This Page (optional)		▶	50400.00
TOTAL This Period (last page this line number only)			

SCHEDULE B (FEC Form 3.)

CHEDOLL B (I LOT OHII 3)	Use seperate schedule(s)		NUMBER: PAGE 4//50
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	7 one) 17
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full) MCNULTY FOR CONGRESS	o and dad look of any pointed so.		
Full Name (Last, First, Middle Initial) 4. Friends of Dan Maffei			Transaction ID: B2802BA3CCCE7480EB Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address P.O. Box 74			09 29 2006
City Syracuse	State Zip Code NY 13214		Amount of Each Disbursement this Period
Purpose of Disbursement contri. (House-25th CD.N.Y.) Candidate Name	C	category/	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Disburse Senate President State: District:	ement For: 2006 Primary X General Other (specify)	Туре	
Full Name (Last, First, Middle Initial) Friends of Peggy King			Transaction ID: B2EDAB83E14814B86B
Mailing Address 812 DeCamp Ave.			Date of Disbursement O 9
City Schenectady	State Zip Code NY 12309		Amount of Each Disbursement this Period
Purpose of Disbursement tickets 9/21/06 event		•	100.00 Refund or Disposal of Excess
Candidate Name	C	ategory/ Type	Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Disburse Senate President State: District:	ement For: 2006 Primary X General Other (specify)		
Full Name (Last, First, Middle Initial) Green Island Fire Department			Transaction ID: BBB4D9748DD214135B Date of Disbursement
Mailing Address 7 Clinton Street			$\begin{bmatrix} \begin{smallmatrix} M & 9 & M \\ 0 & 9 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 5 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Q & Q & Q & Q \\ 2 & 0 & Q & G & Y \end{bmatrix}$
City Green Island	State Zip Code NY 12183		Amount of Each Disbursement this Period
Purpose of Disbursement tickets 9/10/06 event		0 0	100.00 Refund or Disposal of Excess
Candidate Name	C	ategory/ Type	Contributions Required Under 11 C.F.R. 400.53
* H -	ement For: 2006 Primary General Other (specify)		
SUBTOTAL of Disbursements This Page (optional)			1200.00
TOTAL This Period (last page this line number only)			

SCHEDULE B (FECFOIII 3)	Use seperate schedule(s)	FOR LINE	
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	17 18 19a 19b 20a 20b 20c X 21
Any Information copied from such Reports and State or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full) MCNULTY FOR CONGRESS			
Full Name (Last, First, Middle Initial) A. Guilderland Democratic Committee			Transaction ID: B974C2E9AF50C40BA8EDate of Disbursement
Mailing Address Box 741			09 13 2006
City Guilderland	State Zip Code NY 12084		Amount of Each Disbursement this Period
Purpose of Disbursement tickets 10/5/06 event Candidate Name		Category/	Refund or Disposal of Excess Contributions Required Under
Office Sought: House Senate President State: District:	sement For: 2006 Primary X General Other (specify) ▼	Туре	11 C.F.R. 400.53
Full Name (Last, First, Middle Initial) John Hall for Congress			Transaction ID: BA93DA10D8A0D42108 Date of Disbursement
Mailing Address P.O. Box 377			$\begin{bmatrix} 0 & 9 & M & / & 2 & 9 & / & 2 & 0 & 0 & 6 & Y \end{bmatrix}$
City Dover Plains Purpose of Disbursement Contribution(House-19th CD.N.Y.)	State Zip Code NY 12522		Amount of Each Disbursement this Period
Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President State: District:	sement For: 2006 Primary X General Other (specify) ▼		
Full Name (Last, First, Middle Initial) Juvenile Diabetes Foundation			Transaction ID: BD9BD1D64027646CCE Date of Disbursement
Mailing Address Northeastern NY Chap 6 Greenwood Drive	ter		$\begin{bmatrix} 0 & 8 & M \\ 0 & 8 & M \end{bmatrix}$ $\begin{bmatrix} 0 & 2 & 9 \\ 0 & 2 & 9 \end{bmatrix}$ $\begin{bmatrix} 0 & 1 & 1 \\ 0 & 2 & 0 & 0 \\ 0 & 1 & 1 \end{bmatrix}$
City East Greenbush	State Zip Code NY 12061		Amount of Each Disbursement this Period
Purpose of Disbursement 9/17/06 Walk/donation			Refund or Disposal of Excess
Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
· -	sement For: 2006 X Primary General Other (specify)		
SUBTOTAL of Disbursements This Page (optional	l)		1400.00
TOTAL This Period (last page this line number on			
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SCHEDULE B (FEC Form 3)

ITEMIZED DISBURSEMENTS		Use seperate schedule(s) for each category of the Detailed Summary Page	(check only	NUMBER: PAGE 49 / 50 / one) 17
	Information copied from such Reports and State			or the purpose of solicating contributions
or i	or commercial purposes, other than using the nan	ne and address of any political co	mmittee to so	licit contributions from such committee
	NAME OF COMMITTEE (In Full) MCNULTY FOR CONGRESS			
_	Full Name (Last, First, Middle Initial)			Transaction ID: BAAAEDFD9D86A424CA
١.	Lansingburgh Boys and Girls Club			Date of Disbursement
	Mailing Address 501 Fourth Ave.	$\begin{bmatrix}\begin{smallmatrix}M\\O\end{smallmatrix}9^M\end{smallmatrix} \ / \ \begin{bmatrix}\begin{smallmatrix}D\\2\end{smallmatrix}0\end{smallmatrix} \ / \ \begin{bmatrix}\begin{smallmatrix}Y\\2\end{smallmatrix}0\end{smallmatrix}0\end{smallmatrix}0 \ 6^Y$		
	City	State Zip Code		Amount of Each Disbursement this Period
	Troy	NY 12182		100.00
	Purpose of Disbursement tickets 10/19/06 event		Refund or Disposal of Excess	
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburs Senate President State: District:	ement For: 2006 Primary X General Other (specify)		
	Full Name (Last, First, Middle Initial)			Transaction ID: B161E3353331A4F3DBA
B.				Date of Disbursement
	Mailing Address Cohoes Rd			09 13 7 2006
	City Green Island	State Zip Code NY 12183		Amount of Each Disbursement this Period
	Purpose of Disbursement donation			Refund or Disposal of Excess
	Candidate Name	Category/ Type	Contributions Required Under 11 C.F.R. 400.53	
	Office Sought: House Disburs Senate President State: District:	ement For: 2006 Primary X General Other (specify) ▼		
	Full Name (Last, First, Middle Initial)			Transaction ID: B69F995EBD2B14E67A
C.				Date of Disbursement
	Mailing Address 60 East Market Street Suite 244			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 9 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & 2 & 9 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Q & O & G \\ Y & 2 & O & O & G \end{bmatrix}$
	City Corning	State Zip Code NY 14830		Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution (House-29th CD.N.Y.)			Refund or Disposal of Excess
	Candidate Name Cates Type			Contributions Required Under 11 C.F.R. 400.53
	Senate President	ement For: 2006 Primary X General Other (specify)		
	State: District:			
SI	JBTOTAL of Disbursements This Page (optional)			1200.00

	CHEDULE B (FEC Form 3 EMIZED DISBURSEMENTS	 Use seperate schedule(s) 	FOR LINE (check onl	PAGE 50 / 50 yone) 17 18 19a 19b 20a 20b 20c X 21
	y Information copied from such Reports and for commercial purposes, other than using t NAME OF COMMITTEE (In Full) MCNULTY FOR CONGRESS			
Α.	Rotterdam Democratic Club, Inc Mailing Address Heritage Station P.O. Box 4821 City	State Zip Code		Transaction ID: BB8E0B029F33540BCA49 Date of Disbursement 0 9 1 5 2 0 0 6 Amount of Each Disbursement this Period
	Schenectady Purpose of Disbursement tickets 9/26/06 mtg. Candidate Name Office Sought: House Senate President State: District:	NY 12303 Disbursement For: 2006 Primary X General Other (specify)	Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
В.	Full Name (Last, First, Middle Initial) Schenectady First Fund Mailing Address P.O. Box 739			Transaction ID: BE2784D3AFE3B472589E Date of Disbursement M M M / D D / Y Y Y O O 6
	City Schenectady Purpose of Disbursement ticket 9/14/06 event Candidate Name Office Sought: House Senate President State: District:	State Zip Code NY 12301-0739 Disbursement For: 2006 X Primary General Other (specify)	Category/ Type	Amount of Each Disbursement this Period 150.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	<u> </u>	168.00
TOTAL This Period (last page this line number only)	•	55068.00